Michigan Department of Human Services

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Monday, November 10, 2008

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Saturday, November 8, 2008

Man charged with abuse of two foster girls

Oralandar Brand-Williams / The Detroit News

VAN BUREN TOWNSHIP -- A 55-year-old man has been charged with criminal sexual conduct in the alleged sexual assault of two foster children under his wife's care.

Robert Carl Davids was charged Oct. 28 with first-degree criminal sexual assault with a child under 13 in connection with the alleged rape of a now 13-year-old Detroit girl placed in his home by Department of Human Services. Davids was charged in May with first- and second-degree criminal sexual assault in connection with an alleged assault of a 10-year-old foster child who was living in his home in the 15900 block of Pebblebrook.

Davids is being held on \$50,000 bond in the Wayne County Jail awaiting trial in both cases. The alleged assault of the 10-year-old girl was reported in April. The 13-year-old told her mother about the alleged molestation in September.

Davids faces a preliminary exam on the case involving the 13-year-old girl Nov. 19 in 34th District Court in Romulus, said police. He will be back in Wayne County Circuit Court on Dec. 3 for a hearing in the case involving the 10-year-old girl.

Davids' wife, Ann, is not facing charges in the case, said Van Buren Detective Marc Abdilla. The 13-year-old girl was placed in the Davids' home, along with her 7-year-old and 5-month-old sisters, in December 2006.

The girls were removed from the home in May 2007.

The girls' mother blames state officials for what happened to her daughters.

"They have been placing children in homes they haven't been screening very well," said the mom, whom The Detroit News is not identifying to protect the identity of the girls involved.

"I was making complaints in February 2007 almost every day about the home, saying, 'Something is wrong with my (infant) and I don't know what' and I felt no one was taking me seriously," she said.

The woman said she told social workers she thought her daughters were being beaten and sexually assaulted.

Colleen Steinman, a spokeswoman for the Michigan Department of Human Services, said Ann Davids was licensed for four children in February 2006. The license expired Aug. 20 without a request for renewal.

Steinman said when a foster care license is granted by DHS, everyone who lives in that home has to undergo a background check.

http://www.printthis.clickability.com/pt/cpt?action=cpt&title=Man+charged+with+abuse+of+two+foster... 11/10/2008

Steinman said she could not comment on the allegations of sex abuse in the home, citing confidentiality rules regarding Child Protective Services guidelines.

The mother lost custody of her six children in 2006 because her west side Detroit home had been raided for drugs.

But since that time she has taken drug tests and parenting classes and obtained employment to get her children back. She said she expects her children back Dec. 4.

If convicted, Davids could face life in prison.

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Print This Article

Friday, Nov. 07, 2008

Father of child abandoned by mother in Nebraska regains custody of two of their other children

By MEGHA SATYANARAYANA - Detroit Free Press

DETROIT — The father of a Southfield, Mich., boy abandoned in Nebraska by his mother under a controversial law in that state regained custody Friday of the two youngest of the couple's four children.

http://www.freep.com

Oakland County Probate Judge Linda Hallmark granted an emergency request from lawyers representing the parents, the children and Michigan's Child Protective Services at a hearing Friday.

CPS and the children's lawyer said the two biological children of Teri and Nathanial Martin were not adjusting well to their foster home, and the Martins showed good parenting in comforting the 5-year-old during a supervised visit after a doctor appointment.

"It shows we're trying to resolve this. These are not bad people," said Lavonne Jackson, the father's lawyer.

Teri Martin is permitted supervised visits with the children, but she is not allowed to be in their Southfield home while the petition of neglect that initially cost her custody of the four children is unresolved. A jury trial on the petition is scheduled for next month.

The Martins lost their children - two biological and two adopted - after Teri Martin drove more than 700 miles last month with two relatives and abandoned her 13-year-old adoptive son in Nebraska under the state's controversial Safe Haven Law. The Nebraska legislature is expected to reconsider the law because the Southfield boy and a few other out-of-state children are among those who have been dropped off there at hospitals and other "safe havens."

Her desperate act calls into question her mental health, said Deborah Carley, chief deputy prosecutor for Oakland County.

In an affidavit given to Nebraska police, the boy said his mother was stressed out and was trying to teach him a lesson when she left him at an Omaha, Neb., hospital in the middle of the night.

"He's been told for a long time that what's happened to him, what's happened to the family, is all his fault," said Carley.

Friday's hearing concerned the Martins' parental rights to the 13-year-old, but CPS and the children's attorney asked to return the two biological children to the father.

The attorneys also asked to change the 13-year-old's custody to temporary, and to leave him with his fellow adopted brother in a foster home. All four children are still wards of the state.

Indiana Mother Drops Off Son

An 8-year-old boy was left at Bergan Mercy Hospital Thursday in Omaha under Nebraska's "safe haven" law. Thursday, November 6, 2008

Health and Human Services says the child was dropped off Thursday morning by his mother and they are trying to determine if the family has any ties to Nebraska.

Children from Iowa, Michigan, Arizona and Georgia are among the 28 that have been left at Nebraska hospitals since the law took effect in July.

Governor Dave Heineman has called a special session of the legislature for November 14th to change the age limit in the law so it would only apply to newborns.

Mike Flood is the Speaker of the Legislature and believes the special session will last at least seven days and will cost a minimum of \$70,000.





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WZZM 13 News - Print Editon

Food pantries strained with rising demand

Posted By: <u>Amy Fox</u> Reviewed By: <u>Stanton Tang</u>

2 days ago

Grand Rapids (WZZM) - The sliding economy is hurting families around West Michigan and the food pantries that are in place to help. Some pantries are seeing so much more demand they are not able to meet the need.

The <u>ACCESS food pantry network</u> served 1,000 more families in October of 2008 than October of 2007. And that demand just keeps growing.

Terri Burkholder is the new face of hunger. She is a working, single mom who is using her lunch hour to pick up food at the North End Community Ministries food pantry. She has to because money is so tight. Burkholder says, "Tight to the point where I'm about losing my home. That's working 40 hours a week. I try to work the overtime at work. I have an ex-husband that didn't pay child support. So, that's where I'm at."

North End Executive Director Laura Castle is seeing about 20% more clients. Castle says, "It isn't just people who are on assistance, and Medicaid or food stamps. It's also people that have worked jobs for many years."

Right now, the food pantries have the food to meet demands. But, Marsha DeHollander of the ACCESS food pantry network is worried. She says, "It feels a little like panic, and some fear. We know that lines are long. Food pantries are closing, having to turn people away. And that's something that we've not done in the past."

Food pantries depend on donations more than ever. Second Harvest Gleaners, which gets donations from food companies to redistribute to pantries, received a donation of almost 1,200 pounds of beef, and some coats and blankets on Friday. It's thanks to a matching donation program through D&W Fresh Markets. Gleaners Executive Director John Arnold explains, "Our distribution is up about a million pounds from a year ago. Every month we are setting new records. So we're just constantly scrambling, trying to find sufficient food to keep ahead of that."

Single mother Terri Burkholder is doing the same thing, at her kitchen table. She says, "We live on a lot of eggs and bread and milk, and cereal."

The ACCESS food pantry network is in the midst of taking applications for Thanksgiving and Christmas food baskets. Already, they have about 1,000 more applicants than at the same time last year. And they are worried about being able to meet that need as well.

If you need help, you can call the United Way's 211 help line to find the food pantry nearest you. If you can donate and want to give a holiday food basket, call ACCESS at (616) 459-2625.



Need is up at food pantries.

ADVERTISEMENT



Hope for the Saginaw Valley?

Posted by Justin Engel Barrie Barber Jill Armentrout and Jean Spenner | The Saginaw News November 09, 2008 00:37AM

Mid-Michigan has critical issues -- and a president who promises change.

Without ever stepping foot in Saginaw County, President-elect Barack Obama convinced nearly three out of five voters here that he is the best candidate to lead the United States for the next four years.

What does that mean for mid-Michigan?

Opinion is mixed on how Obama's presidency will affect the Saginaw Valley's critical issues: Urban development, alternative energy, troops overseas and health care.

"The difference between having a Democrat from the Midwest and a Republican from Texas as president is overshadowed by other things going on," Saginaw City Attorney Thomas H. Fancher said.

U.S. Rep. Dave Camp, a Midland Republican and Democratic Rep. Dale Kildee of Flint expect to learn more about how Obama's policies will impact mid-Michigan as he begins to appoint key Cabinet and staff members.

With his home in Chicago, Obama understands issues particular to the Great Lakes State, Kildee said. That includes the need for clean water and clear shipping channels.

Obama's pledge to support the auto industry, plus alternative energy and fuels, should bode well for the Saginaw Valley, Camp and Kildee agreed.

Issues of economy, education and health also are high on Obama's list of priorities, Kildee said.

Camp will spend the next term in a Democratic-controlled House and Senate. He faced a similar scenario during the first two years of Bill Clinton's presidency.

"You don't need to be in the majority to have a good idea," Camp said. "You just continue to work with the people you did before."

City not optimistic

A declining manufacturing city, Saginaw -- which delivered 80 percent of its vote to Obama -- has a population that's poor and getting poorer.

With change headed to the White House, city leaders say Obama's ascension to the presidency likely won't affect federal help.

"Two wars and a bad economy will have much more influence (on Saginaw's federal funding) than that," Fancher said.

Mayor Pro Tem Larry Coulouris echoed Fancher's sentiment, saying the state of the nation must improve before Saginaw can expect additional benefits such as more funding to knock down blighted homes or other crime-based

http://blog.mlive.com/saginawnews_impact/2008/11/hope_for_the_saginaw_valley/print.html

"The economy will have a rough ride no matter who the president is," said Coulouris, grandfather of Democratic state Rep. Andy Coulouris of Saginaw.

The city is writing a proposal to tap about \$2 million of the \$3.9 billion in federal Foreclosure Prevention Act of 2008 funds. The money would allow the city to buy homes affected by foreclosures and demolish some of them.

"There's been a real neglect of our urban areas in the last few years," Kildee said. "He will have an urban policy."

While Obama has promised brighter days, campaign assurances aren't always executed after elections, Coulouris said.

"The question is, 'How many of those promises can we fulfill?' " he asked. "That remains to be seen."

Energy solutions

Though Jerry Decker voted for Republican challenger John McCain, Obama's focus on renewable energy will help Michigan and the nation, the energy expert said.

Decker sees the wind as a source of renewable energy that could help power the nation's electricity needs.

The owner of Midland Energy has 15,000 acres in Huron County waiting to sprout up to 150 wind turbines in farm fields to power parts of mid-Michigan.

Decker, 87, is a former leader of Dow Chemical Co.'s energy operations worldwide who said he passed on the chance to work as national energy secretary under then-President Jimmy Carter in the 1970s.

Obama promised a push toward more renewable energy and hybrid-fuel vehicles.

"The very best course is to push alternative energy, all these renewable energies, as hard as we can," Decker said.

In fact, the energy industry could power Saginaw County's economy for the next century, government and business leaders say.

Gov. Jennifer M. Granholm, a frequent visitor to Hemlock Semiconductor Corp. and mid-Michigan wind farms, is among 17 economic transition advisors for Obama, and some speculate she will serve as secretary of the U.S. Department of Energy in his administration.

"His priorities are directly aligned with the governor's economic priorities," Granholm spokesman Liz Boyd said.

Obama campaigned on investing \$150 billion during 10 years to spur private initiatives focused on "clean energy," manufacturing 1 million plug-in hybrids for America's highways and meeting 10 percent of the nation's electrical needs through renewable energy by 2012 and 25 percent by 2025. Michigan already is requiring utilities to meet 10 percent of the state's energy usage through renewable sources by 2015.

Decker also sees a future for biomass plants that produce ethanol from wood waste or switchgrass. While at Dow, he said, he and his colleagues were instrumental in helping Brazil create an ethanol industry that brought the South American nation energy self-reliance.

Hemlock Semiconductor officials, meanwhile, hope the presidential campaign's emphasis on alternative energy will mean growth, spokesman Jarrod Erpelding said.

HSC is in the midst of a \$1 billion expansion that will nearly double production of polycrystalline silicon, an ultra-pure rock-like material needed to produce solar cells and electronic appliances.

Research and development tax credits are key, Camp said.

"We feel the prospect for solar energy in the United States, as well as across the globe, continues to remain high," he said.

In September, McCain made Dow Corning Solar Solutions Application Center his last Michigan campaign stop.

While Obama's declaration of putting more hybrids on the road may sound promising for auto producing Michigan, David Cole has doubts about its impact given the cost and time it will take to produce the vehicles in large volumes.

"It's going to be very difficult to force it unless it is really economic and, like most politicians, talk is cheap" until reality hits, said Cole, chairman of the Center for Automotive Research in Ann Arbor.

Veteran viewpoint

Kirk Newman, who served 23 years in the Marines and retired in 2002 as a chief warrant officer and a special forces team commander, said veterans predominantly are Republicans.

The transition from the Bush administration to the Obama administration is the first such wartime change since 1968, during the Vietnam War, when the nation went from Democrat Lyndon Johnson to Republican Richard Nixon.

"Some of our biggest concerns are what's going to happen to the military" under a Democratic president, said the 51-year-old Albee Township resident.

"Under the Clinton administration funds were cut so drastically. At one point we had 50 bullets for the whole year to shoot in our pistols to practice."

Newman has friends serving in Afghanistan with the Fort Bragg, N.C.-based 7th Special Forces Group.

"They're worried that everybody is going to get pulled out and that (the mission) would be a waste for the guys who were killed," he said. "Some people have been fighting for a couple thousand years over there. Us going over there for five or 10 years isn't going to change a thing."

The United States has more than 150,000 troops in Iraq and 30,000 military personnel in Afghanistan.

Obama has opposed the war in Iraq and has said he will move to withdraw troops there. If that's his plan, he needs to craft it in the right way, said Joe Worrall, 74, a Saginaw Township veteran of the Korean War.

"The problem is like what we had in Saigon," said Worrall, a member of American Legion Post 439 in Saginaw Township. "You just can't go in there and bring them out. In Vietnam they did a terrible job of uprooting troops.

"You do it in a very careful and orderly fashion."

Worrall questioned the need for troops in Iraq, but wondered if Obama may want to put more emphasis on the battles in Afghanistan.

The U.S. should act quickly to respond to countries that support terrorist acts against America, Newman said.

"We go kick their butts and come home and not try to establish a democratic government in a country that doesn't want one," he said. "That's a waste of time."

Health care models

One of out five people in Saginaw County have limited or no health insurance coverage. That compares to 11 percent -- about 1.1 million -- who are uninsured in the state and 6 percent of the nation, U.S. Census data indicate.

http://blog.mlive.com/saginawnews_impact/2008/11/hope_for_the_saginaw_valley/print.html

The lack of coverage creates a drain on public services, hospitals and private practices, health officials say.

Obama's health care plan would require health care for all children and expanding Medicaid -- the federal-state health insurance plan for the poor and disabled -- and the State Children's Health Insurance Program.

Also, Obama would have employers not offering health coverage pay a percentage of their payroll toward a national health plan. He would exempt small businesses. His plan would let people choose a public, Medicare-like plan or browse a shopping center of private insurance offerings.

Granholm has said Obama can help states -- Michigan, with its beleaguered economy, in particular -- by boosting Medicaid reimbursements.

Obama's health advisers have studied the idea of a "medical home" -- a primary care doctor who would help coordinate and oversee care.

David R. Gamez, president and chief executive officer of federally-subsidized Health Delivery Inc. in Saginaw, expects community health centers to "be an integral part of Obama's plan."

Health Delivery treats 45,000 patients at its eight locations, drawing residents from 14 counties.

Uninsured patients pay for visits on an income-based sliding fee scale, but the centers can't provide for all uninsured without some reimbursement. The percentage of uninsured Health Delivery served has gone up in the past six months, resulting in \$500,000 in uncompensated care, Gamez said.

"There are pockets of uninsured all over, but we are at capacity now," Gamez said.

Obama's plan would reduce the number of uninsured nationally by 18 million in the first full year of operation, from the current 45 million, the Washington, D.C.-based Brookings Institution indicated.

That would still leave the country with tens of millions of uninsured citizens.

"(Obama) won't be an overnight panacea," said Cherie Sammis, vice president of mission services at St. Mary's of Michigan.

Sammis helps oversee a network of countywide Healthy Futures clinics whose volunteer staffers offer no-cost medical care. Those staffers relied on the Saginaw Health Plan (which lost a bid for new funding in Tuesday's election) to pay for more permanent care for clients, often sending them to Health Delivery centers.

The volunteer safety nets now in place -- including Healthy Futures and Saginaw's Community Prescription Support Program, which helps uninsured residents find low-cost medicines -- aren't permanent answers, Sammis said.

"Demand keeps growing, and it's a slow hemorrhage," she said. "We can be a part of it, but it's not the fall-back. We can't wait for Obama."

The National Association of Community Health Centers' policy and initiatives forum in March, which will bring together center leaders and legislators, should provide more answers for Gamez.

"I don't think health care is a top priority, but I'm excited by the momentum of the election," he said.

"There's hope that is recharging to our system, that we'll take care of the folks who need it. We finally have someone who can make that happen."

Corey Mitchell of The Saginaw News contributed to this report.

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November 7, 2008

Bad medicine for a hopeful nation

By Robert Goldberg

President-elect Barack Obama has promised that under his health care plan, "if patients like the insurance they have, they keep it and nothing changes, except the costs are lowered. For those who are left out or have substandard insurance, my plan will offer a choice of affordable health insurance plans...We can't start health reform by penalizing doctors."

In fact, as a recent study by the Lewin Group shows, the way Obama plans to increase insurance coverage in this country is create a new national public insurance program, and expand existing programs like Medicaid and SCHIP and pay for it by cutting what hospitals and doctors get paid.

We might have health insurance under Obama's plan, but getting care will be another story altogether. Patient neglect is endemic to public insurance programs. Countless Americans have attested to the problems involved with getting even basic medical care from a public provider.

Take Michigan resident Nicole Garrett. In 2007, she lost her private insurance coverage, and enrolled herself and her three children in Medicaid. When Ms. Garrett's daughter, Jada, needed to be treated by a rheumatologist for joint pain, the one provided by her Medicaid network wouldn't see her -- at all. As Ms. Garrett related to the Wall Street Journal, "When we had real insurance, we could call and come in at the drop of a hat."

Jada had to wait three months just to get an appointment at the public clinic. By the time Ms. Garrett found a rheumatologist, Jada's debilitating pain had forced her to miss several weeks of school.

Edith Andrews of Zanesville, Ohio, faced similar problems with Medicaid. In 2004, she gave birth to premature twin girls. Each weighed less than 3 pounds and needed a ventilator to breathe.

It took Ms. Andrews a year to find a Medicaid-approved pediatrician to care for her infants. In the meantime, she was forced to take the girls to emergency rooms for what would normally be routine care. As she told an Ohio newspaper, "[T]here was never a doctor around when I needed to talk to somebody."

In addition to expanding public insurance programs, Obama also wants to create a national "Center for Comparative Effectiveness," which would test the relative efficacy of new pharmaceutical drugs against old ones. The results would determine which treatments would be covered under public insurance programs.

The theory is that such a center could reduce government healthcare expenses by ensuring that public insurance doesn't cover new drugs that aren't worth the higher price tag. Those savings, in turn, could finance additional expansions of public insurance.

The problem is, a comparative effectiveness center has a financial incentive to find that new treatments shouldn't be covered. The agency is run by the government -- but the government also has to pay for whatever treatments it approves.

The center would likely be under intense pressure not to find new pharmaceutical drugs "cost effective," since they tend to be more expensive. Indeed, patients in countries that already have such an agency have seen their access to breakthrough medicines decrease significantly.

We've also seen such a bias in the states. Medicaid and SCHIP enrollees have a significantly harder time getting coverage for top-flight drugs, and are often forced to use older, less-effective ones.

Witness the case of Ohio resident Melissa Brown, who recently switched her family to Medicaid. Ms. Brown's 6-year-old son, Max, suffers from bipolar disorder and other psychiatric illnesses. Under

private insurance, Max was prescribed drugs that controlled his violent behavior. As Ms. Brown recounted during a hearing held by the Ohio state legislature, the drugs "changed his life."

Ms. Brown says that now that she's on Medicaid, though, Max may be forced to switch to a less advanced drug regime. She pleaded to lawmakers: "This is a day-to-day, minute-to-minute struggle. Please don't make it any more difficult for me."

These are exactly the sorts of stories President-elect Obama should consider as he prepares to assume the highest office in the land. He must make sure that his prescription for fixing America's healthcare system doesn't actually leave millions of people mired in ineffective government programs without access to care when they need it most.

Robert Goldberg is vice president of the Center for Medicine in the Public Interest.



Health levy defeat pinches workers at small businesses

Posted by Jill Armentrout | The Saginaw News November 10, 2008 07:29AM

Barry M. Rindhage of Saginaw likely will lose his health insurance coverage and worries about medical bills piling up during an emergency.

He is one of two employees at The Print Shop in Saginaw Township and contributes to his health insurance along with his boss and a county subsidy.

The defeat Tuesday of an eight-year, 1-mill levy to support basic health services for low-income adults under the nonprofit Saginaw Health Plan will change that.

"Now I'll go back to nothing until I can set up another arrangement," said Rindhage, who is single and has worked at the shop for nearly nine years.

The levy would have generated about \$5 million and brought in \$1.2 million in federal matching funds in its first year. It would have cost the owner of a \$100,000 home about \$50 a year.

The Saginaw Health Plan provides for adult county residents who can't afford to buy private health insurance but don't qualify for Medicaid.

Rindhage, a production manager, went without insurance or much health care for two years before Print Shop owner Benjamin L. Gombar joined a consortium of the Saginaw Health Plan and health initiatives in Genesee and Bay counties called the Tri-Share Program.

The community-subsidized insurance offers benefits that handle hospitalization, intensive care, surgery and anesthesia, doctor's office calls, prescription drugs and X-ray and lab expenses.

The cost of the insurance is divided equally among an employee, an employer and the county. For an unmarried worker, for example, each would pay \$53 a month to cover a \$159 monthly premium.

Those who are eligible must earn \$14.50 or less an hour, work part- or full-time at companies with no more than 50 employees and have proof that they have waived group-sponsored coverage and had no insurance for the previous 12 months.

Seven businesses were enrolled this summer, and leaders had hoped to increase that number, said Linda Hamacher, executive director of the Saginaw Health Plan.

Gombar, 45, of Saginaw Township has owned his shop for 12 years and never offered insurance before Tri-Share.

"It's hard to find policies with such a small pool of employees," he said. "We will look for other alternatives for coverage, but we'll feel the pinch."

Rindhage considers himself fortunate.

"I don't have any major health issues," he said. "I used the insurance twice and once it turned out good, but I ended up

paying for blood tests out of my pocket the other time."

Voters in Bay County on Tuesday defeated a 0.67-mill levy that would have raised \$2 million a year to cover basic medical care for about 4,600 Bay County residents. This defeat also discontinues Tri-Share for Bay County businesses, leaders said.

Genesee County's health plan is supported by a 1-mill levy voters approved in 2006 that generates more than \$11 million for its residents.

Without new funding for the Saginaw Health Plan, 2,500 people now covered will lose care at a rate of 60 per day. Enrollment will drop to about 850 adults with the lowest income levels, Hamacher said.

The tax was to fund current services -- doctor visits, prescriptions, lab tests and X-rays -- for 7,200 legal Saginaw County residents 19 to 64 with incomes up to \$17,500, and add more preventative care and discounted prescriptions for seniors.

Steve D. Walters, president of the health plan Board of Directors and executive director of the primary care network for St. Mary's of Michigan, said the board will look at how to phase out of Tri-Share.

"We won't have the extra money for it," he said. "Our resources are going to be very limited, and we'll have to see what we can do to spread it around."

The health plan budget for 2009 is reduced to about \$500,000 in federal dollars that match county allocation for services at the Saginaw County Department of Public Health, which contracts with the health plan.

The Saginaw County Board of Commissioners voted 9-6 to put the proposal on the November ballot.

Thomas R. Call Jr. of Saginaw Township, head of the grassroots opposition group Stop Taxing Our People, said he is happy the tax failed.

"We have to be diligent about the rampant tax movements popping up every few months. This issue goes beyond the county. The federal and state governments aren't taking care of people, so we should do it? It's a nice idea, but it's not going to work."

Call, 63, a retired teacher who has health insurance through his wife's job, said he supports a socialized national care plan.

"I wouldn't mind paying for that so that everyone has coverage, including me. This county plan isn't full coverage. It's a look good, feel good thing."

Kenneth R. Boomer of Saginaw Township, owner of three Tim Hortons restaurants in the Saginaw area, said about 20 percent of his 100 employees use Tri-Share, which counts each restaurant as an individual business. Boomer pledges to find another plan for his employees.

"I'm not going to throw my staff to the wolves. Either we will pay more or the staff or both," he said.

Boomer said every working person should have health care, but added he doesn't believe in socialized medicine.

"There is no easy or cheap solution. All the county did by voting this down is throw more bad debt to the hospitals, which in turn will pass the cost back to the insurance companies."

Medicare pays an average of \$5,500 to Saginaw-area hospitals to cover the cost of treating a heart attack patient, without complications.

Michigan's nonprofit hospitals, including those in mid-Michigan, spent \$2.6 billion to provide free and discounted care last year to patients and to make up for losses from government programs, the Michigan Health and Hospital

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Health levy defeat pinches workers at small businesses - Saginaw News Impact - MLive.com

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Association reports.

David R. Gamez, president and chief executive officer of federally subsidized Health Delivery Inc., 501 Lapeer in Saginaw, said his agency "wrote off" \$500,000 in uncompensated care in the past six months. Uninsured patients without Medicaid pay for visits on an income-based sliding fee scale, he said.

"We are not capable of providing care for all the uninsured in the county," he said.

The network of countywide Healthy Futures clinics, which offer medical care at no cost with volunteer caregivers, has relied on the health plan to find more permanent care for clients. The clinics will face more demand and aren't designed to provide ongoing care, said Cherie Sammis, vice president of mission services at St. Mary's of Michigan hospital in Saginaw, a network member.

"We're going to have to come back to the table to figure out what will happen to these people."

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[&]quot;This defeat will create an extra burden, but we will do the best we can."

Crain's Detroit Business Page 1 of 1



11:37 am, November 6, 2008

Granholm's executive order will cut state budget

By Amy Lane

Gov. Jennifer Granholm plans to issue an executive order by the end of the year that will cut Michigan's current-year budget.



Granholm did not state an amount that would be cut, but administration estimates and lawmakers have said there could be a \$300 million to \$600 million shortfall in the fiscal 2009 budget.

"It's going to be a very, very challenging year," Granholm said, speaking at a Lansing news conference.

Granholm said she is waiting to issue the executive order until after **University of Michigan** economists release their latest forecasts at the Nov. 20-21 UM annual economic outlook conference. She also wants to see what might be in a second federal stimulus package that would help all states, such as in the area of Medicaid.

Economy-focused assistance, in a variety of areas, is a key concern.

The governor announced that the **Michigan Department of Treasury** is making \$150 million available to Michigan banks and credit unions to help them make loans to small businesses. Under the program, the state will purchase certificates of deposit at participating banks and credit unions that commit to lending at least 80 percent of the funding to Michigan businesses.

Granholm is urging congressional leaders in Washington to provide \$25 billion in "bridge" loans to the auto industry. The loans, which have been under discussion and would be in addition to the \$25 billion loan program Congress funded in September, would address what Granholm called an "immediate cash flow problem" in the auto industry.

The governor said the needs of the auto industry are critical and a matter not just for Michigan but for the country and for national security.

"It is not an acceptable solution to allow this auto industry to fail," she said.

Granholm sent a letter on Thursday to U.S. House Speaker Nancy Pelosi and U.S. Senate Majority Leader Harry Reid, outlining assistance needed in a second federal stimulus package, including:

- -- Federal funding for infrastructure projects, with little or no state matching requirement for the funds.
- -- Assistance with foreclosures, including new requirements for loan modifications and additional counseling funds for states to help borrowers negotiate with mortgage servicers.

On the state level, Granholm also is calling on the Legislature to promptly pass a newly introduced bill that would authorize the state insurance commissioner to provide a 90-day freeze on foreclosure proceedings to allow homeowner and lender to work out terms.

- -- Extension of unemployment benefits, including an additional 13 weeks of assistance in states with higher unemployment levels.
- -- Expansion of worker retraining funds.
- -- Extension of food stamp assistance.

Separately, Granholm laid out her priorities for the Legislature's post-election "lame-duck" session, including bills that would expand Detroit's **Cobo Center**, pave the way for a light-rail system in Detroit, and enable the creation of "promise zones" around the state to provide impoverished students with college tuition.<

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State Budget Cut Plans

November 6, 2008 - 5:40PM

Governor Jennifer Granholm has announced her plans to make spending cuts in our current state budget.

At a press conference Thursay Granholm said she wants to also set aside 150 million dollars for state banks and credit unions to lend to Michigan businesses during the credit crisis.

"We know that the banking industry has had trouble having access to liquidity, we want to give them access through depositing our state common cash short term dollars into state financial institutions," said Granholm.

Governor Granholm also says she sent a letter to Washington Thursday requesting five things for our state.

Granholm asks for another 25 billion dollars for the auto industry, money for infrastructure and development and foreclosure assistance.

She asks for investments in alternative energy and finally, says she wants to expand unemployment benefits, food stamp programs and worker retraining.

Granholm also says she's excited to be governor under the Obama administration, but when asked if she'd turn down a job on Obama's staff, she avoided the question.